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for maintenance fee notif		ierwise in Bioci	к 1, бу (а) sp	ectrying a ne	•		iting a separate "FEE ADDRESS"
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 28120 ROPES & GRAY LLP One International Place Boston, Massachusetts 02110					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. (Depositor's name)		
APPLICATION NO.	FILING DATE		FIRST NAM	IED INVENT	OR	ATTORNEY DOCKET NO	O. CONFIRMATION NO.
10/726,343	12/02/2003			. Johnson, III		ACIZ-P01-004	9005
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TITLE OF INVENTIO	N: OKTHOPEDIC	APPLIANCE V	WITH MOIS	I UKE MAN	AGEMENT SY	SIEM	
APPLN. TYPE	SMALL ENTITY	ISSUE	FEE	PUBLICA	ATION FEE	TOTAL FEE(S) DUE	DATE DUE
Non-Provisional	no	\$1,51	\$1,510.00		00.00	\$1,810.00	11/14/2009
EXAMINER		ART UNIT		CLASS-S	SUBCLASS		
G. E. Richman 3764 1. Change of correspondence address or indication of "Fee 2. For printing on the patent front page, list							
Address" (37 CFR 1.36 Change of cor Correspondence "Fee Address" in form PTO/SB/4 Use of a Custor 3. ASSIGNEE NAME	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. NTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) DJO, LLC Vista, California							w, the document has been filed
Please check the appropriate	te assignee category or catego	ories (will not be	printed on the	patent):	Individual	X Corporation or other priva	te group entity Government
4a. The following fee(s) are enclosed: 4b. Payment of Fe							
X Issue Fee A check in the amount of						s) is enclosed.	
X Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.							
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	atus (from status indicate ims SMALL ENTITY sta	,	R 1.27.	X b. Applic	ant is no longer	r claiming SMALL ENTITY	status. See 37 CFR 1.27(g)(2).
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Authorized Signature /Jong Min Park/				_		Date	October 2, 2009
Typed or printed name Jong Min Park					Registration No.	63,389	